

# **UIHS Inc., Klamath Health Center**



#### **Executive Summary**

Summarizes the Site, Parking, Facility Size, Staff and Contract Health Dollars necessary for the Service Delivery Plan in 2015. Identifies the Direct Care Services Offered to include highlighting any new services. Identifies the communities and population served for each service. The second page of the Executive Summary documents the priority resource issues as identified through the Master Planning process.

#### **Historical Utilization by Location of Encounter**

Documents 3 years of RPMS and contract care workloads provided at the facility predominantly serving the Primary Care Service Area by product line and specialty.

#### **Historical Utilization by Community of Residence**

Documents 3 years of RPMS and contract care workloads provided to the user population of the Service Delivery Area by product line and specialty.

#### **Market Assessment**

Compares the Historical Workload to the Health System Planning software and to national averages of patient care utilization, projecting future workloads based upon the worst case of these three planning scenarios. Also documents the percentage of care that will require contracting due to acuity and the quantity of care that can potentially be served by the direct care system.

#### **Service Delivery Plan**

Recommended service delivery plan by product line based upon projected workload, key characteristics, patient classification and tribal and IHS input.

#### **Resource Allocation**

Quantifies the necessary space and key characteristics for the Service Delivery Plan and compares them against existing resources. Also tabulates necessary contract health dollars based on the delivery plan.

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## **Executive Summary**

Leased from Tribe



Resource Summary								
	Existing	Need	%					
Total Gross Sq Mtrs (GSM)	392	932	42.1%					
IHS Supportable GSM	392	932	42.1%					
IHS Parking Spaces	10	32	31.2%					
IHS Site (Hectares)	0.3	0.8	37.4%					
Recurring IHS Positions vs RRM	2.0	11.0	18.2%					
IHS Supportable Space Staff	3.0	13.7	21.9%					
Contract HIth \$	88,056	1,569,792	5.6%					

**Service Summary** 

Primary Care, including
FP
Traditional Healing
Dental
Visiting Professionals, including
Optometry
Mental Hith., Soc. Svc. (PT),
Alcohol & SA
PHN
CHR
Transportation

Population Summary										
2003 User Pop	447	Growt	Growth Rate		% 2015 User Pop		2015 User Pop		560	
2015 by Age										
0-14	163	163 15-44 246 45-64				93 65+				
Average Age										
Service Area	32.1	Calif	ornia	26.7	USA 36.0					
Expanded Service Area #1 2015 User Pop										
Services										
Communities										
Ехр	oanded Se	ervice Area	a #2		2015 U	ser Pop	N/A			
Services										
Communities										

New services are identified in red.



#### **Executive Summary**

#### **Service Area Description**

Klamath Health Center, serving the Primary Care Service Area Communities listed to the left, is located in Klamath, California south of Crescent City and north of Arcata.

As part of United Indian Health Services, it is a point of basic care for Native Americans on the North California coast. It sends most of its referral workload to Arcata/Potawot for Primary Care support or Sutter Hospital in Crescent City for Hospital services. The closest alternative care options can be found in Crescent City (Primary & Secondary Care) and Eureka (Tertiary Care).

As noted in the Service Summary to the left, Klamath Health Center plans to operate under the Small Ambulator Care (SAC) Criteria as a Large Health Station. As such it will operate 40 hours a week with basic services. Dental, PHN and Contract Health will be on-site. FP, Dental, Optometry, and Mental Health are anticipated as visiting providers and will be provided by Potawot Center in Arcata or a new Crescent City services area.

#### **Facility Description**

The 392 SM Facility is permanent construction located on land leased from the tribe and was originally constructed in 1985.

	Services & Resourcing Priorities							
1	Provide additional Family Practice as on-site asset	Services & Resourcing needs are						
2	Provide Nursing support (1 FTE) for Family Practice  not prioritized. Prioritization process at time of publications  Provide Traditional Medican							
3	Provide Traditional Healing	as part of Strategic Plan  Development.						
4	Provide Dentist							
5	Provide additional dental chair							
6	Expand dental department space							
7	Provide Mental Health counselor							
8	Provide visiting Social Services counselor							
9	Provide Alcohol & Substance Abuse Counselor							
10	Add BH Counselor office							
11	Expand BH space							
12	Provide Pharmacy store space							
13	Expand medical records space							
14	Secure clinical engineering support							
15	Secure half-day a week Facility Management staff							



# **Executive Summary**

	Services & Resourcing Priorities Continued							
16	Secure two days a week Property & Supply staff and space							
17	Provide Housekeeping staff and additional space							
18	Provide PHN staff and space							
19	Provide Transporter							
20								
21								
22								
23								
24								
25								

	Campus Infrastructure Priorities								
1		7							
2		8							
3		9							
4		10							
5		11							
6		12							

	Functional Deficiencies								
1	Existing layout inefficient.	7							
2	No conference room.	8							
3	Parking insufficient.	9							
4	Clinic needs to be replaced with a more adequate facility.	10							
5		11							
6		12							

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## UIHS Inc., Klamath Health Center



# Historical Workloads by Location of Encounter - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	Direct or Tribal Health Care				Contract Health Care				
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care
		Provider \	isits Only			Р	rovider Visits	Only	<u>'</u>
Primary Care									
Family Practice	1,509	1,391	1,550	1,483	0	0	0	0	0.0%
Internal Medicine	0	0	0	0				0	0%
Pediatric	0	0	0	0	0	0	0	0	0%
Ob/Gyn	0	0	0	0	0	0	0	0	0%
Emergency Care									
Emergency/Urgent	0	0	0	0				0	0%
ER/Non-urgent	0	0	0	0				0	0%
Specialty Care									
Orthopedics	0	0	0	0	0	0	0	0	0%
Ophthalmology	0	0	0	0	0	0	0	0	0%
Dermatology	0	0	0	0	0	0	0	0	0%
General Surgery	0	0	0	0	0	0	0	0	0%
Otolaryngology	0	0	0	0	0	0	0	0	0%
Cardiology	0	0	0	0	0	0	0	0	0%
Urology	0	0	0	0				0	0%
Neurology	0	0	0	0	0	0	0	0	0%
Nephrology	0	0	0	0	0	0	0	0	0%
Allergy				0				0	0%
Pulmonology		_	_	^		_	_	^	00/
Gerontology									
Gastroenterology	N	o Provide	r Codes	within RP	MS Syste	m for the	se types	of Specia	alist.
Rheumatology		o i iovido	. Couco		e eyete		00 1,700	о. Ороск	
Oncology									
Pediatric-Genetics				0				0	0%
Traditional Healing	0	0	0	0				0	0%
Totals	1,509	1,391	1,550	1,483	0	0	0		0%
Direct & Tribal Care + Contract Care	1,509	1,391	1,550	1,483					

<sup>\*</sup> Provider Visits - Document visits to a Physician, Nurse Practitioner, Midwife, and or Physician Assistant.

**Other Ambulatory Care Services** 

Dental Service Minutes	20	1,514	0	511				0	0.0%
Optometry Visits	0	0	0	0	0	0	0	0	0%
Podiatry Visits	0	0	0	0	0	0	0	0	0%
Dialysis Patients	0	0	0	0				0	0%
Audiology Visits	0	0	0	0	0	0	0	0	0%
Outpatient Behavioral									
Health									
Mental Health Visits	25	13	59	32				0	0.0%
Psychiatry	0	0	0	0	0	0	0	0	0%
Social Services Visits	0	0	0	0				0	0%
Alcohol & Substance Abuse Visits	43	13	0	19				0	0.0%
BH Visit Totals	68	26	59	51	0	0	0	0	0.0%

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## UIHS Inc., Klamath Health Center



# Historical Workloads by Location of Encounter - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	Direct or Tribal Health Care				Contract Health Care				
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care
Inpatient Care									
Labor & Delivery Births	0	0	0	0	0	0	0	0	0%
Obstetrics Patient Days	0	0	0	0	0	0	0	0	0%
Neonatology Patient Days	0	0	0	0	0	0	0	0	0%
Pediatric Patient Days	0	0	0	0	0	0	0	0	0%
Adult Medical Patient Days									
Cardiology	0	0	0	0	0	0	0	0	0%
Endocrinology	0	0	0	0	0	0	0	0	0%
Gastroenterology	0	0	0	0	0	0	0	0	0%
General Medicine	0	0	0	0	0	0	0	0	0%
Hematology	0	0	0	0	0	0	0	0	0%
Nephrology	0	0	0	0	0	0	0	0	0%
Neurology	0	0	0	0	0	0	0	0	0%
Oncology	0	0	0	0	0	0	0	0	0%
Pulmonary	0	0	0	0	0	0	0	0	0%
Rheumatology	0	0	0	0	0	0	0	0	0%
0,	0	0	0	_	0	0	0	0	0%
Unknown	_	-		0					
Medical Patient Day Total	0	0	0	0	0	0	0	0	0%
Adult Surgical Patient Days		_	_	_			_	_	
Dentistry	0	0	0	0	0	0	0	0	0%
Dermatology	0	0	0	0	0	0	0	0	0%
General Surgery	0	0	0	0	0	0	0	0	0%
Gynecology	0	0	0	0	0	0	0	0	0%
Neurosurgery	0	0	0	0	0	0	0	0	0%
Ophthalmology	0	0	0	0	0	0	0	0	0%
Orthopedics	0	0	0	0	0	0	0	0	0%
Otolaryngology	0	0	0	0	0	0	0	0	0%
Thoracic Surgery	0	0	0	0	0	0	0	0	0%
Urology	0	0	0	0	0	0	0	0	0%
Vascular Surgery	0	0	0	0	0	0	0	0	0%
Surgical Patient Day Total	0	0	0	0	0	0	0	0	0%
	0	0	0						0%
Psychiatry Patient Days				0	0	0	0	0	
Medical Detox Patient Days	0	0	0	0	0	0	0	0	0%
Sub Acute/Transitional Care	0	0	0	0	_	_		0	0%
Inpatient Care Totals	0	0	0	0	0	0	0	0	0%
Direct & Tribal + Contract Care	0	0	0	0					
Substance Abuse Non- Acute	e Care								
Adult Residential Treatment	0	0	0	0				0	0%
Adol. Residential Treatment	0	0	0	0				0	0%
SA Transitional Care	0	0	0	0				0	0%
Substance Abuse Totals	0	0	0	0	0	0	0	0	0%
Elder Care									
Skilled Nursing Patients	0	0	0	0				0	0%
Assisted Living Patients	0	0	0	0				0	0%
Hospice Patients	0	0	0	0				0	0%
Nursing Home Totals	0	0	0	0	0	0	0	0	0%
Truising Home Totals	U	U	U	U	U	U	U	U	0 70

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# Historical Workloads by Location of Encounter - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	Direct or Tribal Health Care			Contract Health Care					
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care
Ancillary Services									
Lab Billable Tests	1,271	1,184	635	1,030				0	0.0%
Pharmacy Scripts	0	0	0	0				0	0%
Acute Dialysis Procedures	0	0	0	0				0	0%
Radiographic Exams	11	1	1	4	0	0	0	0	0.0%
Ultrasound Exams	0	0	0	0				0	0%
Mammography Exams	0	0	0	0				0	0%
Fluoroscopy Exams	0	0	0	0				0	0%
CT Exams	0	0	0	0				0	0%
MRI Exams	0	0	0	0				0	0%
Nuclear Medicine Exams	0	0	0	0				0	0%
Rad. Oncology Treatments	0	0	0	0				0	0%
Chemotherapy Treatments	0	0	0	0				0	0%
Physical Therapy Visits	0	0	0	0				0	0%
Occupational Therapy Visits	0	0	0	0				0	0%
Speech Therapy Visits	0	0	0	0				0	0%
Respiratory Therapy	0	0	0	0				0	0%
Cardiac Catheterization	0	0	0	0				0	0%
Home Health Care Patients	0	0	0	0				0	0%
Minor Procedure Cases									
Endoscopy	0	0	0	0	0	0	0	0	0%
Outpatient Surgery Cases									
Cardiovascular	0	0	0	0	0	0	0	0	0%
Digestive	0	0	0	0	0	0	0	0	0%
Endocrine	0	2	1	1	0	0	0	0	0.0%
ENT	0	0	0	0	0	0	0	0	0%
Gynecology	0	0	0	0	0	0	0	0	0%
Hemic and Lymphatic	0	0	0	0	0	0	0	0	0%
Integument	0	0	0	0	0	0	0	0	0%
Musculoskeletal	0	0	0	0	0	0	0	0	0%
Nervous	0	0	0	0	0	0	0	0	0%
Ocular	0	0	0	0	0	0	0	0	0%
Respiratory	0	0	0	0	0	0	0	0	0%
Urogenital	0	0	0	0	0	0	0	0	0%
OP Surgical Case Total	0	2	1	1	0	0	0	0	0%
Inpatient Surgery Cases	0	0 2	0	0 1	0	0	0	0	0%
Surgical Case Total	0	2	1	1	0	0	0	0	0%
Direct & Tribal + Contract Care	0	2	1	1					
EMO Pro House 12 LB			_	0				0	001
EMS - Pre-Hospital Resp.	0	0	0	0				0	0%
EMS - Inter Hospital Resp	0	0	0	0				0	0%

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# Historical Workloads by Community of Residence - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	D	irect or Trib	al Health Ca	ıre		Co	ntract Healt	h Care	
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care
		Provider \	isits Only			Р	rovider Visits	Only	
Primary Care									
Family Practice	1,807	2,013	2,013	1,944	0	0	0	0	0.0%
Internal Medicine	0	0	0	0				0	0%
Pediatric	0	0	0	0	0	0	0	0	0%
Ob/Gyn	0	0	0	0	0	0	0	0	0%
Emergency Care									
Emergency/Urgent	0	0	0	0				0	0%
ER/Non-urgent	0	0	1	0				0	0.0%
Specialty Care									
Orthopedics	0	0	0	0	0	0	0	0	0%
Ophthalmology	4	3	1	3	0	0	0	0	0.0%
Dermatology	0	0	0	0	0	0	0	0	0%
General Surgery	0	0	0	0	0	0	0	0	0%
Otolaryngology	0	0	0	0	0	0	0	0	0%
Cardiology	0	0	0	0	0	0	0	0	0%
Urology	0	0	0	0				0	0%
Neurology	0	0	0	0	0	0	0	0	0%
Nephrology	0	0	0	0	0	0	0	0	0%
Allergy				0				0	0%
Pulmonology		_	_	^	_	_	_	^	00/
Gerontology									
Gastroenterology	No	o Provide	r Codes	within RP	MS Syste	m for the	se types	of Specia	alist
Rheumatology		o i rovido	. Couco		e eyete		00 1,700	от ороско	
Oncology									_
Pediatric-Genetics				0				0	0%
Traditional Healing	0	0	0	0				0	0%
Totals	1,811	2,016	2,015	1,947	0	0	0		0%
Direct & Tribal Care + Contract Care	1,811	2,016	2,015	1,947					

<sup>\*</sup> Provider Visits - Document visits to a Physician, Nurse Practitioner, Midwife, and or Physician Assistant.

**Other Ambulatory Care Services** 

Dental Service Minutes	20	1,514	0	511				0	0.0%
Optometry Visits	19	30	23	24	0	0	0	0	0.0%
Podiatry Visits	0	0	0	0	0	0	0	0	0%
Dialysis Patients	0	0	0	0				0	0%
Audiology Visits	0	0	0	0	0	0	0	0	0%
<b>Outpatient Behavioral</b>									
Health									
Mental Health Visits	25	13	59	32				0	0.0%
Psychiatry	15	4	5	8	0	0	0	0	0.0%
Social Services Visits	0	0	0	0				0	0%
Alcohol & Substance Abuse Visits	43	13	0	19				0	0.0%
BH Visit Totals	83	30	64	59	0	0	0	0	0.0%

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# Historical Workloads by Community of Residence - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

		Direct or Trib	al Health Ca	are		Сог	ntract Healt	h Care	
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care
Inpatient Care									
Labor & Delivery Births	0	0	0	0	0	0	1	0	100.0%
Obstetrics Patient Days	0	0	0	0	0	0	3	1	100.0%
Neonatology Patient Days	0	0	0	0	0	0	0	0	0%
Pediatric Patient Days	0	0	0	0	0	0	0	0	0%
Adult Medical Patient Days									
Cardiology	0	0	0	0	0	0	6	2	100.0%
Endocrinology	0	0	0	0	0	0	0	0	0%
Gastroenterology	0	0	0	0	0	0	0	0	0%
General Medicine	0	0	0	0	0	16	0	5	100.0%
Hematology	0	0	0	0	0	0	0	0	0%
Nephrology	0	0	0	0	0	0	0	0	0%
Neurology	0	0	0	0	0	0	0	0	0%
Oncology	0	0	0	0	0	0	0	0	0%
Pulmonary	0	0	0	0	0	8	0	3	100.0%
Rheumatology	0	0	0	0	0	0	0	0	0%
Unknown	0	0	0	0	0	0	0	0	0%
Medical Patient Day Total	U	0	0	0	0	24	6	10	100.0%
Adult Surgical Patient Days	0	0	0	0	0	^	0	0	0%
Dentistry		0	0	0	0	0	0	0	
Dermatology	0	0	0	0	0	0	0	0	0%
General Surgery	0	0	0	0	0	0	0	0	0%
Gynecology	0	0 0	0	0 0	0	0 0	0 0	0 0	0% 0%
Neurosurgery		0	0	0	0			_	0%
Ophthalmology	0	0	0	0	2	0 0	0	0 1	100.0%
Orthopedics	0	0	0	0	0	0	0	0	0%
Otolaryngology Thoracic Surgery		0	0		0	0			0%
	0	0	0	0 0	0	0	0	0 0	0%
Urology Vascular Surgery	0	0	0	0	0	0	0	0	0%
Surgical Patient Day Total	0	0	0	0	2	0	0	1	100.0%
Psychiatry Patient Days	0	0	0	0	0	0	0	0	0%
	0	0	0	0	0	0	0	0	0%
Medical Detox Patient Days Sub Acute/Transitional Care	0	0	0	0	U	U	U	0	0%
Inpatient Care Totals	0	0	0	0	2	24	9	12	100.0%
inpatient date rotals		U	0	0		27	<u> </u>	12	100.070
Direct & Tribal + Contract Care	2	24	9	12					
Substance Abuse Non- Acute	e Care								
Adult Residential Treatment	0	0	0	0				0	0%
Adol. Residential Treatment	0	0	0	0				0	0%
SA Transitional Care	0	0	0	0				0	0%
Substance Abuse Totals	0	0	0	0	0	0	0	0	0%
Elder Care									
Skilled Nursing Patients	0	0	0	0				0	0%
Assisted Living Patients	0	0	0	0				0	0%
Hospice Patients	0	0	0	0				0	0%
Nursing Home Totals	0	0	0	0	0	0	0	0	0%

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# Historical Workloads by Community of Residence - Native American

Historical Workloads according to RPMS, Contract Health and Questionnaire data.

	D	irect or Trib	al Health Ca	ıre		Со	ntract Healtl	n Care	
Discipline	2002	2003	2004	Average	2002	2003	2004	Average	% Contract Care
Ancillary Services									
Lab Billable Tests	1,271	1,184	635	1,030				0	0.0%
Pharmacy Scripts	0	0	0	0				0	0%
Acute Dialysis Procedures	0	0	0	0				0	0%
Radiographic Exams	11	1	1	4	0	0	0	0	0.0%
Ultrasound Exams	0	0	0	0	ŭ	· ·	ŭ	0	0%
Mammography Exams	0	0	0	0				0	0%
Fluoroscopy Exams	0	0	0	Ö				0	0%
CT Exams	0	0	0	0				0	0%
MRI Exams	0	0	0	0				0	0%
Nuclear Medicine Exams	0	0	0	0				0	0%
Rad. Oncology Treatments	0	0	0	0				0	0%
Chemotherapy Treatments	0	0	0	0				0	0%
Physical Therapy Visits	4	2	0	2				0	0.0%
Occupational Therapy Visits	0	0	0	0				0	0%
Speech Therapy Visits	0	0	0	0				0	0%
Respiratory Therapy	0	0	0	0				0	0%
Cardiac Catheterization	0	0	0	0				0	0%
Home Health Care Patients	0	0	0	0				0	0%
Minor Procedure Cases									
Endoscopy	0	0	0	0	0	0	0	0	0%
Outpatient Surgery Cases									
Cardiovascular	0	0	0	0	0	0	0	0	0%
Digestive	0	0	0	0	0	0	0	0	0%
Endocrine	1	0	0	0	0	0	0	0	0.0%
ENT	0	0	0	0	0	0	0	0	0%
Gynecology	0	0	0	0	0	0	0	0	0%
Hemic and Lymphatic	0	0	0	0	0	0	0	0	0%
Integument	0	0	0	0	0	0	0	0	0%
Musculoskeletal	0	0	0	0	0	0	0	0	0%
Nervous	0	0	0	0	0	0	0	0	0%
Ocular	0	0	0	0	0	0	0	0	0%
Respiratory	0	0	0	0	0	0	0	0	0%
Urogenital	0	0	0	0	0	0	0	0	0%
OP Surgical Case Total	1	0	0	0	0	0	0	0	0%
Inpatient Surgery Cases	0	0	0	0	1	0	0	0	100.0%
Surgical Case Total	1	0	0	0	1	0	0	0	50%
Direct & Tribal + Contract Care	2	0	0	1					
EMS - Pre-Hospital Resp.	0	0	0	0				0	0%
· · ·									
EMS - Inter Hospital Resp	0	0	0	0				0	0%

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## Market Assessment - Native American

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

Year		2003			2015		2015 PI	anning Ass	umption
HSP User Pop PSA		447			560		201011	anning A55	amption
HSP User Pop PSA	0.1/	447		6 W	300				0
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care
Bulancas	Pro	vider Visits On	ly	Pro	vider Visits Or	nly	Pi	ovider Visits O	nly
Primary care				2 100					
Family Practice	1,944	495		2,436	620	Cell = Sub-Total	1,670	1,670	0
Internal Medicine	0	196		0	244	less PC	244	244	0
Pediatric	0	241		0	303	Specialties	303	303	0
Ob/Gyn	0	174		0	218		218	218	0
Urgent Care Clinic Primary Care Sub-Tot.	0 1,945	1,106	1,727	0 2,436	1,385	2.162	0 2,436	0 2,436	0 0
Primary Care Sub-Tot.	1,945	1,106	1,727	2,430	1,300	2,102	2,430	2,430	U
Emergency Care									
Emergency/Urgent	0	102		0	127	Cell = Sub-Total	127	127	0
ER/Non-urgent		68			85	less E/U	▶ 115	115	0
Emerg. Care Sub-Tot.	0	169	193	0	212	242	242	242	0
Specialty Care									
Orthopedics	0	84		0	105		105	105	0
Ophthalmology	3	67		3	84		84	84	0
Dermatology	0	66		0	83		83	83	0
General Surgery	0	66		0	82		82	82	0
Otolaryngology	0	39		0	49		49	49	0
Cardiology	0	22		0	27		27	27	0
Urology	0	24		0	30		30	30	0
Neurology	0	18		0	22		22	22	0
Other Specialties		144		0	180		130	130	0
Nephrology	0	Unknown		0	Unknown		0	0	0
Allergy	0	14		0	17		17	17	0
Pulmonology	0	6		0	7		7	7	0
Gerontology	0	Unknown		0	Unknown		0	0	0
Gastroenterology	0	12		0	14		14	14	0
Rheumatology	0	Unknown 9		0	Unknown		0	0 11	0
Oncology Pediatric-Genetics	0 0	-		0	11 Unknown		11 0	0	0 0
Traditional Healing		Unknown Unknown		-			0	0	0
Specialty Care Sub-Tot.	0 3	570	78	0 3	Unknown 712	95	662	662	0
· ,	<u> </u>	370	70	3	112	93	002	002	U
Total Provider Visits By PSA Residents	1,947	1,845	1,998	2,440	2,310	2,500	3,341	3,341	0
Provider Visits	Unme	-51	Over Utilization	n if (1)					
i lovider visits	need if (-	) -51	Over offinzatio	(1)					
Total Provider Patient	4.00	4.40	4.47	The rate is	established b	y dividing the	Total Provide	r Visits from th	ne PSA by
Utilization Rate	4.36	4.13	4.47	the User Po	opulation.				
Other Ambulatory Care									
Services	1								
Dental Service Minutes	511	40,086	42,465	641	50,207	53,200	53,200	53,200	0
Optometry Visits	24	Unknown	144	30	Unknown	180	180	180	0
Podiatry Visits	0	100		0	124		124	124	0
Dialysis Patients	0	Unknown	<b>5</b> 0	0	Unknown	07	0	0	0
Audiology Visits	0	77	52	0	96	67	96	96	0
Outpatient Behavioral Health	Services								
Mental Health Visits	32	Unknown	71	41	Unknown	90	90	90	0
Psychiatry	8	45		10	56		56	56	0
Social Services Visits	0	Unknown		0	Unknown		0	0	0
Alcohol & Substance Abuse	19	Unknown		23	Unknown		23	23	0
BH Visits Totals	59	45	71	74	56	90	170	170	0

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## Market Assessment - Native American

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

Year		2003			2015		2015 PI	anning Ass	ımntion
HSP User Pop PSA		447			560		201311	allilling Ass	amption
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care
	Provi	der Visits O	nly	Pro	vider Visits On	ily	Р	rovider Visits O	nly
Inpatient Care		_							_
Labor & Delivery Births	0	9	7	0	11	9	11	9	2
Obstetrics Patient Days	1	17	15	1	22	19	22	18	4
Neonatology Patient Days Pediatric Patient Days	0 0	25 12	N/A	0	31 16	N/A	31 16	19 10	12 6
Adult Medical Patient Days	U	12	IN/A	U	10	IN/A	10	10	Ö
Cardiology	2	16		3	20		20	18	6
Endocrinology	0	3		0	3		3	4	0
Gastroenterology	0	9		0	11		11	14	0
General Medicine	5	12		7	14		14	16	2
Hematology	0	1		0	2		2	1	1
Nephrology	0	3		0	4		4	4	1
Neurology	0	7		0	8		8	9	1
Oncology	0	4		0	5		5	2	4
Pulmonary	3	15		3	19		19	20	4
Rheumatology	0	1		0	1		1	1	0
Unknown	0	1		0	1		1	1	0
Medical Patient Day Total	10	71	84	13	88	108	108	90	18
Adult Surgical Patient Days									
Dentistry	0	0		0	0		0	0	0
Dermatology	0	0		0	0		0	0	0
General Surgery	0	19		0	24		24	16	8
Gynecology	0	4		0	5		5	4	1
Neurosurgery	0	5		0	6		6	2	4
Ophthalmology	0	0		0	0		0	0	0
Orthopedics	1	13		1	16		16	13	2
Otolaryngology	0 0	4		0 0	5 10		5 10	1	4
Thoracic Surgery Urology	0	8 3		0	3		3	2	9 2
Vascular Surgery	0	5 5		0	6		6	3	4
Surgical Patient Day Total	1	60	53	1	75	66	75	41	34
Psychiatry Patient Days	0	10	7	0	12	8	12	3	9
			,			O			
Medical Detox Patient Days	0	2		0	2		2	1	1
Sub Acute/Transitional Care	0	44		0	54		54	54	0
Inpatient Care Totals	12	240	158	15	300	202	320	236	84
Inpatient Patient Days	Unmet need if (-)	-229	Over Utilization	on if (+)					
Substance Abuse Non-Acute	Care								
Adult Residential Treatment	0	77		0	96		96	96	0
Adol. Residential Treatment	0	20		0	24		24	24	0
SA Transitional Care	0	3		0	4		4	4	0
Substance Abuse Total	0	100	0	0	124	0	124	124	0
Elder Care									
Skilled Nursing Patients	0	1		0	1		1	1	0
Assisted Living Patients	0	1		0	1		1	1	0
Hospice Patients	0	0		0	0		0	0	0
Nursing Home Total	0	2	0	0	3	0	3	3	0

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## Market Assessment - Native American

Historical vs. Market Potential - In accordance to the population, compares the Historical Workload to the US State or National Average (USNA) and IHS Health System Planning (HSP) Software. USNA are taken from a number of sources see Patient Utilization Table for sources.

Year		2003			2015		2015 PI	anning Ass	umption
HSP User Pop PSA		447			560				
Discipline	3 Year History	USNA	HSP	3 Year History	USNA	HSP	Total	Direct Care	Contract Care
	Pro	ovider Visits On	ly	Pro	ovider Visits On	ly	P	rovider Visits O	nly
Ancillary Services									
Laboratory Services									
Clinical Lab Billable Tests		1,977	1,550		2,470	1,945	2,470	2,229	142
Microbiology Billable Tests		273	363		341	455	455	262	175
Blood Bank Billable Tests		50	29		63	38	63	59	1
Anatomical Pathology		4	10		5	12	12	7	4
Lab Billable Tests	1,030	2,305	1,953	1,290	2,879	2,450	2,879	2,557	322
Pharmacy Scripts	0	4,613		0	5,774		5,774	5,774	0
Acute Dialysis Procedures	0	2		0	2		2	2	0
Radiographic Exams	4	164	178	5	205	222	222	222	0
Ultrasound Exams	0	31	25	0	39	31	39	39	0
Mammography Exams	0	68	58	0	85	71	85	85	0
Fluoroscopy Exams	0	8	12	0	10	16	16	16	0
CT Exams	0	13	4	0	16	5	16	16	0
MRI Exams	0	8		0	10		10	10	0
Nuclear Medicine Exams	0	19		0	24		24	24	0
Rad. Oncology Treatments	0 0	Unknown		0	Unknown		0	0	0
Chemotherapy Treatments	U	Unknown		0	Unknown		0	0	0
Rehabilitation Services	2	I lades acces		2	I balan arras		0	400	0
Physical Therapy Visits	0	Unknown		3	Unknown		3	192	0
Occupational Therapy Visits Speech Therapy Visits	0	Unknown		0	Unknown		0	55 27	0 0
Rehab Total Visits	2	Unknown	217	0 3	Unknown	275	275	275	0
Respiratory Therapy	2	-	217	3	-	213		2/5	U
Workload Minutes	0	Unknown	1,941	0	Unknown	2,480	2,480	2,480	0
Cardiac Catheterization	0	2		0	4		4	4	0
Home Health Care Patients	0	4		0	5		5	5	0
Minor Procedure Cases	Ü	-		Ü	Ü		O	ŭ	· ·
Endoscopy	0	8		0	10		10	10	0
Outpatient Surgery Cases	· ·	Ü		Ü	.0		10	10	· ·
Cardiovascular	0	1		0	1		1	1	0
Digestive	0	8		0	10		10	10	0
Endocrine	0	0		0	0		0	0	0
ENT	0	3		0	4		4	4	0
Gynecology	0	2		0	3		3	3	0
Hemic and Lymphatic	0	0		Ō	0		0	0	0
Integument	0	3		0	4		4	4	0
Musculoskeletal	0	5		0	6		6	6	0
Nervous	0	1		0	2		2	2	0
Ocular	0	4		0	5		5	5	0
Respiratory	0	0		0	1		1	1	0
Urogenital	0	2		0	3		3	3	0
OP Surgical Case Total	0	30	12	0	37	15	38	38	0
Inpatient Surgery Cases	0	12	11	0	15	12	15	9	6
Surgical Case Total	1	42	23	1	53	26	53	47	6
EMS Responses	0	59		0	73		73	73	0
FINIS LESPONSES	U	33		U	13		13	13	J

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## Delivery Plan - Native American (IHS)

Large Health Station SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need				Delivery	Options		
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA		Referral Thres	s due to shold	
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks

Primary Care (Provider Visits)

Crossover % 0.0%

Primary Care Clinic examines, diagnoses, and treats ambulatory patients giving continuity and coordination to their total healthcare including referral to other health professionals and admissions to inpatient services while retaining primary responsibility for care of these patients, as appropriate. Primary Care Clinic assesses, provides, and evaluates the care of patients with healthcare problems including history and physical, assessment and treatment of common minor illnesses, maintenance care of patients with chronic diseases, and health counseling and teaching.

Family Practice	1,670	1,670	Providers	0.6	1,888				SAC
Internal Medicine	244	244	Providers	0.1	-				Rolled Up to FP
Pediatric	303	303	Providers	0.1					Rolled Up to FP
Ob/Gyn	218	218	Providers	0.1					Rolled Up to FP
Urgent Care Clinic	0	0	Providers	0.0	0				
Primary Care Total	2,436	2,436	Providers	0.6	1,889	0	0	0	0

#### **Emergency Care**

The Emergency Medical Clinic provides emergency care, diagnostic services, treatment, surgical procedures, and proper medical disposition of an emergency nature to patients who present themselves to the service. It refers patients to specialty clinics and admits patients as needed; provides clinical consultation services and professional training of assigned personnel; supports mass casualty and fire drills; and prepares reports.

· ·	_		* *	-			•			
Emergency/Urgent	127	127	Patient Spaces	0.0			127			
ER/Non-urgent	115	115	Providers	0.0			115			
Emergency Care Total	242	242	Patient Spaces	0.1	0	0	242	0	0	

#### **Specialty Care**

Crossover %

0.0%

Specialty Care examines, diagnoses, and treats diseases and injuries requiring specialized capabilities diagnosis and procedures beyond the Primary Care team.

The service is typically provided by visiting providers who have established clinic hours for consistent referral patterns.

Orthopodics

105

Providers

0.0

Orthopedics	105	105	Providers 0.0			105			
Ophthalmology	84	84	Providers 0.0			84			
Dermatology	83	83	Providers 0.0			83			Telemedicine
General Surgery	82	82	Providers 0.0			82			
Otolaryngology	49	49	Providers 0.0			49			
Cardiology	27	27	Providers 0.0			27			
Urology	30	30	Providers 0.0			30			
Neurology	22	22	Providers 0.0			22			
Subspecialties	130	130	Providers 0.1			130			
Nephrology	0	0	Providers 0.0			0			
Allergy	17	17	Providers 0.0			17			
Pulmonology	7	7	Providers 0.0			7			
Gerontology	Unknown	0	Providers Unknown			Х			
Gastroenterology	14	14	Providers 0.0			14			
Rheumatology	Unknown	0	Providers Unknown			х			
Oncology	11	11	Providers 0.0			11			
Pediatric-Specialist	Unknown	0	Providers Unknown			х			
Traditional Healing	0	0	Providers 0.0	1.0					
Specialty Care Sub- Total	662	662		1	0	662	0	0	

THE INNOVA GROUP

July 2006

## **UIHS Inc., Klamath Health Center**



## Delivery Plan - Native American (IHS)

Large Health Station SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need				Delivery	Options		
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA			als due to eshold	
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remark
Other Ambulatory Care										
Crossover % - Dental	0.0%		Crossover % - Optometry	0.0%						
ental Service	53,200	53,200	Dentists	1.0	53,200					SA
			Visiting Specialist							
•			and maintaining the high		oral health p		mphasizes	•		
ptometry Visits	180	180	Optometrist	0.1		180			SAC - Sup	
		•	ks, and adnexa includin	•	•	ocedures, prescr	ibes lenses	to correct re	tractive erro	and improv
			nosis and treatment of		ilsease.			404		4- 0
Podiatry Visits	124	124	Podiatrists nts with disorders, disea	0.0	iurios to the f	oot or adjunctive	ticcuo: pro	124	un cara for s	to Arca
	•	•	rehensive plan of care			•			•	•
•		•	prevention of disease; a			•	•			-
· · · · · · · · · · · · · · · · · · ·			sion of reports, and ma	,			,		,,,	
i assigneu personnei,			Dialysis Stations	0.0			0			
pialysis Patients vialysis provides the p and monitor the hemod udiology Visits	dialysis equipr 96	ment and ot	s blood through use of a ther specialized support Audiologists	n artificial ki t equipment 0.0	for patients v	vho are undergo	ing hemodi	alysis treatm 96	ent in the uni	to Arca
Dialysis Patients Dialysis provides the pand monitor the hemodaudiology Visits The Audiology Clinic patients for remediation	purification of the dialysis equiprion 96  rovides complete and rehability	he patient's ment and ot 96 rehensive a itation; assi	s blood through use of a ther specialized suppor Audiologists audiologic support for pa ists in the evaluation of	n artificial ki t equipment 0.0 atients for th auditory and	for patients v  e determinati	who are undergo ion of etiology, p ystems. Specific	ing hemodi athology, a c services in	alysis treatm 96 nd magnitude	ent in the uni e of hearing I one threshold	to Arca loss and d audiometi
Dialysis Patients Dialysis provides the pand monitor the hemodaudiology Visits The Audiology Clinic protential for remediationsic and advanced cli	urification of to dialysis equipr 96 rovides compon and rehabil inical testing;	he patient's ment and ot 96 rehensive a itation; assi pediatric ev	s blood through use of a ther specialized suppor Audiologists audiologic support for pa	n artificial ki t equipment 0.0 atients for th auditory and aring testing	for patients ved determinated vestibular spart of the	who are undergo ion of etiology, p ystems. Specific e early hearing lo	ing hemodia athology, as services in oss identific	96 nd magnitude nclude pure t ation prograi	ent in the uni e of hearing I one threshol m; hearing ai	to Arca oss and d audiometi d evaluation
Dialysis Patients Dialysis provides the pand monitor the hemodaudiology Visits The Audiology Clinic protential for remediationsic and advanced cli	urification of to dialysis equipr 96 rovides complon and rehabil inical testing; ar mold fittings	he patient's ment and ot 96 rehensive a itation; assi pediatric ev	s blood through use of a ther specialized suppor Audiologists audiologic support for pa ists in the evaluation of valuations; neonatal hea	n artificial ki t equipment 0.0 atients for th auditory and aring testing	for patients ved determinated vestibular spart of the	who are undergo ion of etiology, p ystems. Specific e early hearing lo	ing hemodia athology, as services in oss identific	96 nd magnitude nclude pure t ation prograi	ent in the uni e of hearing I one threshol m; hearing ai	to Arca oss and d audiometi d evaluation
Dialysis Patients Dialysis provides the pand monitor the hemocratic dialogy Visits The Audiology Clinic particular for remediation asic and advanced clittings, and repairs; eagerral and disposition	urification of to dialysis equipr 96 rovides complon and rehabil inical testing; ar mold fittings	he patient's ment and ot 96 rehensive a itation; assi pediatric ev	s blood through use of a ther specialized suppor Audiologists audiologic support for pa ists in the evaluation of valuations; neonatal hea	n artificial ki t equipment 0.0 atients for th auditory and aring testing	for patients ved determinated vestibular spart of the	who are undergo ion of etiology, p ystems. Specific e early hearing lo	ing hemodia athology, as services in oss identific	96 nd magnitude nclude pure t ation prograi	ent in the uni e of hearing I one threshol m; hearing ai	to Arca oss and d audiometr d evaluation
Dialysis Patients Dialysis provides the pand monitor the hemocratic plants The Audiology Visits The Audiology Clinic particular for remediation asic and advanced clittings, and repairs; eagerral and disposition Behavioral Health	purification of tidialysis equipr 96 provides compon and rehabilinical testing; in mold fittings	he patient's ment and of 96 rehensive a itation; assi pediatric ev ; vestibular	blood through use of a ther specialized suppor Audiologists audiologic support for pa ists in the evaluation of raluations; neonatal hea evaluations, dispensing	n artificial ki t equipment 0.0 atients for th auditory and aring testing g of hearing	e determinati d vestibular s as part of the protection de	who are undergo ion of etiology, p ystems. Specific e early hearing lo evices (fitting, ea	ing hemodia athology, a c services ir oss identific ducation, an	alysis treatm 96 nd magnitude nclude pure t ation prograi	ent in the uni e of hearing I one threshol n; hearing ai l; determinati	to Arca to Arca oss and d audiometr d evaluatior on of prope
Dialysis Patients Dialysis Provides the pand monitor the hemodaudiology Visits The Audiology Clinic potential for remediatic basic and advanced clittings, and repairs; eaferral and disposition Behavioral Health Behavioral Health pro	purification of the dialysis equipment of th	he patient's ment and of 96 rehensive a itation; assi pediatric ev ; vestibular	blood through use of a ther specialized support Audiologists audiologic support for pa- ists in the evaluation of raluations; neonatal hea- evaluations, dispensing evaluations, dispensing	n artificial kit tequipment  0.0 atients for the auditory and aring testing g of hearing	e determinated vestibulars; as part of the protection de	who are undergo ion of etiology, p ystems. Specific e early hearing le evices (fitting, ea cioeconomic eva	ing hemodia athology, ac a services in ass identific lucation, an	alysis treatm 96 nd magnitude nclude pure t ation prograi d motivation,	ent in the uni e of hearing I one threshol m; hearing ai l; determinati	to Arca oss and d audiometr d evaluatior on of prope
Dialysis Patients Dialysis Provides the prind monitor the hemodaudiology Visits The Audiology Clinic protential for remediatic basic and advanced cliftings, and repairs; earlierral and disposition Behavioral Health Behavioral Health propervices, patient care,	purification of the dialysis equipmed of the dialysis equipmed or one of the dialysis equipmed o	he patient's ment and of 96 rehensive a itation; assi beediatric ev; vestibular tric, psychoeferral, and	blood through use of a ther specialized support Audiologists sudiologic support for pa ists in the evaluation of valuations; neonatal hea evaluations, dispensing to evaluations, dispensing logical, psychosocial, s	n artificial kit equipment  0.0 atients for the auditory ancerting testing g of hearing ubstance abacilitate med	e determinated vestibulars, as part of the protection de	who are undergo ion of etiology, p ystems. Specific e early hearing le evices (fitting, ed	ing hemodia athology, ac a services in ass identification, and ducation, and duation and tr; and prop	alysis treatm 96 nd magnitude noclude pure t ation prograt d motivation)  consultation er disposition	ent in the united of the unite	to Arca oss and d audiometr d evaluation on of prope
Dialysis Patients Dialysis provides the pand monitor the hemocaudiology Visits The Audiology Clinic passic and advanced clittings, and repairs; eaferral and disposition Behavioral Health Behavioral Health propervices, patient care, putpatient) referred to	purification of the dialysis equipmed of the d	he patient's ment and of 96 rehensive a itation; assi pediatric ev; vestibular tric, psychoeferral, and rk Clinic, w	s blood through use of a ther specialized support Audiologists audiologic support for pa ists in the evaluation of valuations; neonatal hea evaluations, dispensing logical, psychosocial, se follow-up services to fa hich includes self-refer	n artificial kit equipment  0.0 atients for the auditory and aring testing g of hearing  ubstance abacilitate med red patients	e determinated vestibulars, as part of the protection de puse, and socioal diagnosis and those se	ion of etiology, p ystems. Specific e early hearing le evices (fitting, ed cioeconomic eva s, care, treatmer en automatically	athology, and a services in the services in th	alysis treatm 96 nd magnitude nclude pure t ation prograt d motivation; consultation er disposition is of diagnos	ent in the universe of hearing if one threshold in; hearing air; determinating if individual air of patients is (for example)	to Arca oss and d audiometi d evaluation on of prope
Dialysis Patients Dialysis provides the pand monitor the hemocaudiology Visits The Audiology Clinic pastic and advanced clittings, and repairs; easeferral and disposition Behavioral Health Behavioral Health propervices, patient care, putpatient) referred to whild abuse or attempte	purification of the dialysis equipmed of the d	he patient's ment and of 96 rehensive a itation; assi pediatric ev; vestibular tric, psycho eferral, and rk Clinic, w	s blood through use of a ther specialized support Audiologists audiologic support for pa ists in the evaluation of valuations; neonatal hea evaluations, dispensing logical, psychosocial, s follow-up services to fa hich includes self-refer comprehensive plan of	n artificial kit to equipment  0.0 atients for the auditory and arting testing g of hearing  ubstance abacilitate med ared patients for each patients for each patients of service to p	e determinated vestibulars, as part of the protection de pusse, and sociocal diagnosis and those se patients and t	ion of etiology, p ystems. Specific e early hearing le evices (fitting, ed cioeconomic eva s, care, treatmer en automatically their families incl	athology, at a services in ser	alysis treatm 96 nd magnitude nclude pure t ation prograt d motivation; consultation, er disposition is of diagnos seling and gu	ent in the universe of hearing if one threshold in; hearing air; determinating if individual air of patients is (for examplidance, there	to Arca oss and d audiomete d evaluation on of prope and group (inpatient ai
Dialysis Patients Dialysis Povides the p and monitor the hemon Audiology Visits The Audiology Clinic p otential for remediatic asic and advanced cli ttings, and repairs; ea eferral and disposition Behavioral Health Behavioral Health pro ervices, patient care, utpatient) referred to hild abuse or attempto	purification of the dialysis equipment of th	he patient's ment and of 96 rehensive a itation; assi pediatric ev; vestibular tric, psycho eferral, and rk Clinic, was provides a ge planning	s blood through use of a ther specialized support Audiologists audiologic support for pa ists in the evaluation of valuations; neonatal hea e evaluations, dispensing logical, psychosocial, s follow-up services to fa hich includes self-refer comprehensive plan of g; provides clinical and	n artificial kit tequipment 0.0 atients for the auditory and aring testing g of hearing ubstance absocialitate medical patients of service to proposed	e determinated vestibulars as part of the protection de pr	ion of etiology, p ystems. Specific e early hearing lo evices (fitting, ed cioeconomic eva s, care, treatmer en automatically their families incl patients and fami	athology, and a services in se	alysis treatm  96  nd magnitude nclude pure t ation prograt d motivation,  consultation, er disposition is of diagnos seling and gu service delive	ent in the universe of hearing if one threshold in; hearing air; determinating if individual air of patients is (for examplidance, there	to Arca oss and d audiomete d evaluation on of prope and group (inpatient ai
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Obstetrics provides for specialized care, treatment, and consultative evaluation to eligible inpatients; provides antepartum, delivery, and postpartum care to maternity patients; and has responsibility for the operation and maintenance of the labor and delivery suite. The labor and delivery suite provides labor and delivery care by specially trained personnel to eligible patients, including prenatal care during labor, assistance during delivery, post-natal care, and minor gynecological surgery, if it is performed in the suite. Additional activities may include preparing sterile set-ups for deliveries; preparing patients for transportation to the delivery suite and the post-anesthesia.

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18

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0.4

Neonatology 19 19 # of Bassinets 0.4 0 19

LDRs

# of Beds

The Newborn Nursery provides specialized inpatient care, treatment, and consultative evaluation of newborn infants; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of the newborn, including those born prematurely; and provides for, or otherwise ensures, appropriate diagnostic evaluation and care of all inpatient in the neonatal age group; prepares medical records; and submits required reports.

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Labor & Delivery

**Obstetrics Patient** 

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18

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18

#### UIHS Inc., Klamath Health Center



## Delivery Plan - Native American (IHS)

Large Health Station SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need		Delivery Options					
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA			s due to shold	
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Pediatric Patient Days	10	10	# of Beds	0.3	0		10			

Pediatric Care provides specialized inpatient care, treatment, and consultative evaluation of infants, children, and adolescents; maintains close liaison with the other professional services; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of eligible patients; prepares medical records; and submits required reports.

#### Adult Medical Acute Care

Medical Care provides inpatient care and consultative evaluation in the medical specialties and subspecialties described in this section; coordinates healthcare delivery relative to the examination, diagnosis, treatment and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the medical care function will vary according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies.

Cardiology	18	18	# of Beds 0.2	0	18			
Endocrinology	4	4	# of Beds 0.0	0	4			
Gastroenterology	14	14	# of Beds 0.2	0	14			
General Medicine	16	16	# of Beds 0.2	0	16			
Hematology	1	1	# of Beds 0.0	0	1			
Nephrology	4	4	# of Beds 0.0	0	4			
Neurology	9	9	# of Beds 0.1	0	9			
Oncology	2	2	# of Beds 0.0	0	2			
Pulmonary	20	20	# of Beds 0.2	0	20			
Rheumatology	1	1	# of Beds 0.0	0	1			
Unknown	1	1	# of Beds 0.0	0	1			
Medical Patient	90	90	1.0	0	90	0	0	
Day Total		30	1.0	0	30	0		
A I I O ' I A '	0							

#### Adult Surgical Acute Care

Surgical Care provides inpatient care and consultative evaluation in the surgical specialties and subspecialties described in this subsection; coordinates healthcare delivery relative to the examination, treatment, diagnosis, and proper disposition of eligible patients, appropriate to the specialty or subspecialty; prepares medical records; and submits required reports. The organization of the surgical care function varies according to patient load, staffing, and facilities. When subspecialty services are established, they shall provide the related specialized techniques and practices using all the available modern diagnostic procedures, studies, and therapies

Dentistry	0	0	# of Beds 0.0	0	0			
Dermatology	0	0	# of Beds 0.0	0	0			
General Surgery	16	16	# of Beds 0.2	0	16			
Gynecology	4	4	# of Beds 0.1	0	4			
Neurosurgery	2	2	# of Beds 0.0	0	2			
Ophthalmology	0	0	# of Beds 0.0	0	0			
Orthopedics	13	13	# of Beds 0.2	0	13			
Otolaryngology	1	1	# of Beds 0.0	0	1			
Thoracic Surgery	0	0	# of Beds 0.0	0	0			
Urology	2	2	# of Beds 0.0	0	2			
Vascular Surgery	3	3	# of Beds 0.0	0	3			
Surgical Patient	41	41	# of Beds 0.6	0	 44	0	0	
Day Total	41	41	# of Beds 0.6	0	41	0	0	
Intensive Care	24	24	# of beds 0.1	0	24			

Intensive Care Units (ICUs) provide treatment for patients who require intensified, comprehensive observation and care because of shock, trauma, or other life-threatening conditions. They are staffed with specially trained personnel and contain monitoring equipment and other specialized support equipment for treating.

Psychiatry	3	3	# of Beds 0.0	0	3

Psychiatric Care provides specialized care and consultative evaluation for eligible inpatients; coordinates healthcare delivery relative to the examination, diagnosis, treatment, and proper disposition of patients with psychotic, neurotic, or other mental disorders; maintains protective custody of patients with psychiatric disorders when required to prevent injury to themselves or to others; establishes therapeutic regimens; conducts individual or group therapy sessions; provides short-term treatment to patients psychologically or physically dependent upon alcohol or drugs; maintains custody of sensitive or medically privileged records and correspondence that evolve during treatment of patients; prepares medical records; and submits required reports.

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## UIHS Inc., Klamath Health Center



## Delivery Plan - Native American (IHS)

Large Health Station SAC

Establishes Projecte	ed workload	and key c	haracteristics per p	roduct line,	while reco	ommending a	delivery op	tion.		
			Projected Need							
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd	PSA			Referral Thres		
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Medical Detox	1	1	# of Beds	0.0	0		1			
Substance Abuse Care diagnosis, treatment, a when required to preve sensitive or medically p	nd proper dispent injury to the	position of p emselves or	atients psychologically to others; establishes	or physicall therapeutic	y dependent regimens; co	t upon alcohol o onducts individu	r drugs; main al or group th	tains protecti erapy sessio	ive custody o ons; maintain	of patients as custody of
Sub Acute / Transitional Care	54	54	# of Beds	0.2	0		54			
Transitional Care provi acute care, provides sp			•	•	U	eyond their discl	harge from a	cute care. St	affing, while	less than
Inpatient Care Totals	260	260	# of Beds	3	0		260	0	0	
Substance Abuse Non-Acute Care Substance Abuse Non-	-Acute Care -	the treatme	nt of substance abuse	disorders in	an age and	security specific	: settina			
Adult Residential	riodio odro	the treatme	ni or dabotaneo abado			occurry opcome	ooung.			
Treatment	96	96	# of Beds	0.3			96		96	
Adolescent Residential	24	24	# of Beds	0.1			24		24	

Treatment			o. 2000	0.0				
Adolescent								
Residential	24	24	# of Beds	0.1		24		24
Treatment					<u></u>			
Substance Abuse	4	4	# of Beds	0.7			4	to Crescent City
Transitional Care	4	4	# 01 Deus	0.7			4	to Crescent City
Substance Abuse								
Non-Acute Care	124	124		1.1	0	120	4	120
Totals								

		_	
Eld	er	Ca	re
	<b>U</b>	<u> </u>	

Elderly Care Program	provides phy	vsical, psycho	logical, social, and spiri	tual care fo	r healthy and dying sen	iors in an environm	ent outside	of a hospital.	
Nursing Home	1	1	# of Beds	1.0		1		1	
Assisted Living	1	1	# of Beds	2.0		1		1	
Hospice	0	0	# of Beds	0.0		0		0	
Elder Care Totals	3	3		3.0	0	3	0	3	

#### **Ancillary Services**

Crossover % -

0.0% Pharmacy

Laboratory

Clinical Pathology operates the clinical laboratories and conducts studies, investigations, analyses, and examinations, including diagnostic and routine tests and systems. Additional activities may include, but are not limited to, transportation of specimens from the nursing floors and surgical suites and preparation of samples for testing. The Clinical Lab includes Chemistry, Urinalysis, Hematology, Serology, Immunology and Coagulation.

Clinical Lab	2,229	2,229	Techs @ Peak	0.0		2,229	Ltd. Space in PC
Microbiology	262	262	Techs @ Peak	0.0	262		
Blood Bank	59	59	Techs @ Peak	0.0	59		
Anatomical	7	7	Techs @ Peak	0.0	7		

Anatomical Pathology conducts the histopathology and cytopathology laboratories; directs studies, examinations, and evaluations including diagnostic and routine procedures; provides referrals and consultations; performs post-mortem examinations; and operates the morgue.

Lab Totals	2,557	2,557	Techs @ Peak	0.0	0	0	328	2,229	0
Pharmacy	5,774	5,774	Pharmacists	0.0				5,774	Store - Sup @ Cres.
Acute Dialysis	2	2	Rooms	0.0			2		

Acute Dialysis Services provides purification of the patient's blood, removing excess water and toxins, at the bedside while the patient is hospitalized. Specialty trained personnel, supervised by a nephrologist, rotate through the hospital caring for and providing this service to admitted patients requiring dialysis.

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## UIHS Inc., Klamath Health Center



## Delivery Plan - Native American (IHS)

Large Health Station SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need				Delivery	Options		
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA		Referra	ls due to shold	
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Diagnostic Imaging					-					
Diagnostic Radiology p										
Radiographic	222	222	Rooms	0.0				222	to C	Cresent City
Ultrasound		39	Rooms	0.0	-			39		to Arcata
Mammography		85	Rooms	0.0			85			
Fluoroscopy	16	16	Rooms	0.0			16			
СТ		16	Rooms	0.0			16			
MRI		10	Rooms	0.0			10			
Diagnostic Imaging Totals	388	388	Radiologist	0.0	0	0	127			
Nuclear Medicine	24	24	Rooms	0.0			24			
injectable or ingestible performing clinical inve- consulting with patients	estigative stud s and attendin	lies, providir ng physician	ng whole blood counting s, and maintaining radi	g, evaluating ioactive was	g patients sus	pected of being	contaminat	ed with gamn		
Rad. Oncology	0	0	Rooms	0.0			0			
Chemotherapy Rehabilitation Service	0	0	Patient Spaces	0.0			0			
Rehabilitation Services		ordinatos	and uses special knowle	adae and el	rille in nlannin	a organizina a	nd managin	a programs fo	or the care o	f innationts
and outpatients whose consultation, counselin Occupational Therapy, Physical Therapy	g, teaching, a and Speech	dministratio							: Physical Ti	
Occupational	55	55	Therapy FTE	0.0				55	to C	Cresent City
Speech Therapy		27	Therapy FTE	0.0				27		Cresent City
Rehab Total	275	275	Therapy FTE	0.2		0	0	275	to C	Cresent City
Respiratory Therapy	2,480	2,480	Therapy FTE	0.0			2,480			
Respiratory Therapy portions of rehabilitative to service also tests and oblood.	herapy includ	ing initiating	g, monitoring, and evalu	ıating patier	nt performanc	e and reactions	to therapy a	and performin	g blood gas	analysis. Th
Cardiac Catheterization Cases	4	4	Rooms	0.0			4			
The Cardiac Catheteriz heart and circulatory sy retrieving and analyzin	vstem. Other g test results;	activities in and inspec	clude explaining test pr ting, testing, calibrating	ocedures to , and maint	patients; per	forming invasive		•	ters and oth	er techniques
Home Health Care	5	5	# FTE	0.0						ncl. in PHN
Home Health Care is p independence while m						, maintain, or re	store health	or to maximi	ze the level	of
Surgery										
The Surgery product lin Minor Procedure Room		nesthesiolo	gy, Pre & Post Recover	ry, and the p	provision of in	vasive procedur	es requiring	the sterility o	of an Operati	ng Room or
Minor Procedure										
Endoscopy Outpatient Surgery		10	Endo Suites	0.0			10			
Cardiovascular		1	Outpatient ORs	0.0			1			
Digestive		10	Outpatient ORs	0.0			10			
Endocrine		0	Outpatient ORs	0.0			0			
ENT	4	4	Outpatient ORs	0.0			4			
Gynecology	3	3	Outpatient ORs	0.0			3			
Hemic / Lymphatic	0	0	Outpatient ORs	0.0			0		-	-
		4	O t	0.0						

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Integument

Musculoskeletal

4

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4

6

Outpatient ORs

**Outpatient ORs** 

0.0

# UIHS Inc., Klamath Health Center



## Delivery Plan - Native American (IHS)

Large Health Station SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need				Delivery	Options		
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA			ls due to shold	
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks
Nervous	2	2	Outpatient ORs	0.0			2			
Ocular		5	Outpatient ORs	0.0			5			
Respiratory		1	Outpatient ORs	0.0			1			
Urogenital		3	Outpatient ORs	0.0			3			
OP Surgical Case		38	Outpatient ORs	0.0	0	0	38	0	0	
npatient Surgery	9	9	Inpatient ORs	0.0	0	0	9	0	0	
Surgical Case		47	1 200 2 2	0.0	0	0	57	0	0	
Administrative Support										
Administration			# of FTE	0.0	0.0				See	THA - SA
to the facility; determin responsible for the car	es medical ca e, treatment, a	pabilities re	· · · · · · · · · · · · · · · · · · ·	cal services	officers, supp			•	_	s; is
Nursing Administrat		facility bo	# of FTE th inpatient and outpation	0.0	0.0	hiring and conti	auad aducat	ion of the nu	reing and mo	SA dical aid st
Manages nursing quali	ity improveme					ming and contin	idea educaii	on or the nur	sing and me	
Quality Managemer Responsible for creder		professiona	# of FTE al staff, performance imp	0.0 provement e	0.0 efforts within to	he facility and p	atient care u	tilization revi	ew.	SA
nformation Manage	mont		# of FTE	0.7	0.7					SA
		nt provides	the responsibility for ma		-	peration training	maintenan	ce and devel	lonment of th	
<del>-</del>	•	-	rking resources allocate			_		ce and devel	opment or th	e
Health Information I			# of FTE	0.4	0.4	ian nealth och	100.			SA
			for assembling, collecti			ensuring avail	ability and s	afekeening c	of patient rec	
	_		d improve patient care.	.g, complet		, onounng avam	aomiy, and o	aronoopiing o	, panom roo	J. 40 (4.00
Business Office			# of FTE	0.0	0.0					SA
Business Office implen	ments adminis	trative proc	edures to maximize ne	recovery o	f healthcare d	elivery costs fro	m third-party	y payers; ide	ntifies patien	ts that have
other health insurance,	; reviews all a	spects of a	ccounts receivable man	agement, c	omplies with t	hird-party payei	requiremen	ts; submits a	II claims to th	nird-party
payers; follows up to e	nsure that col	lections are	made; and documents	and reports	s collection ac	tivities.				
Contract Health			# of FTE	0.0	0.0					SA
Care, identifying other Facility Support Services	alternate reso		ccess to medical care to ablishing medical prioriti	es and havi	ng an effectiv		-		-	nts, and sta
Clinical Engineering			# of FTE	0.1	0.1					SA
determine operational equipment; repairs or r	status, and as replaces worn	signs servi or broken j	enance, inspection, and iceability condition code parts; rebuilds and fabri sembles, packs, receive	s to equipm cates equip	ent; performs ment or comp	scheduled prev onents; modifie	rentive maint s equipment	tenance of m	edical and d	ental
Facility Managemer			# of FTE	0.1	0.1					SA
The maintenance of a	health sites fa	cilities, buil	lding systems and groui	nds						
Central Sterile			# of FTE	0.0	0.0					SA
The decontamination,	assembly, ste	rilization ar	nd distribution of reusab	le instrumei	ntation. Also re	esponsible for ti	he distributio	n of other ste	erile products	3.
Dietary			# of FTE	0.0	0.0					SA
The ordering, maintena nutritional consultation			g and distribution of me	als to inpati	ents, outpatie	nts and staff. No	utritional ove	rsight for the	se meals as	well as
Property & Supply			# of FTE	0.4	0.4					SA
procurement, inventory and non-medical suppl	/ control, rece lies and equip	ipt, storage ment requii	supplies, equipment, ar , quality assurance, isso red in support of the me authorization, property	ue, turn in, d dical missic	disposition, pr on; installation	operty accountii management o	ng and repor If the medica	rting acitons t Il stock fund;	for designate managemen	d medical t and contro

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managing the installation medical war readiness material program.

# UIHS Inc., Klamath Health Center



## Delivery Plan - Native American (IHS)

Large Health Station SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need		Delivery Options						
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA		Referrals Thres			
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks	
Housekeeping & Lir	nen		# of FTE	0.7	0.7					SAC	
The Housekeeping Sei	rvice provides	•	lity for maintaining the i ip, sorting, issuing, dist	interior of a fa		•					
			education programs wit								
staff. These departme Disease Prevention	nts provide le	adership to	all areas of the facility	in their effort	s to increase	the health awai	reness of the	e public. HPD	P - Health F	romotion &	
Public Health Nursir	ng		# of FTE	1.3	1.3					SA	
Public Health Nutriti	ion		# of FTE	0.0	0.0						
Environmental Heal	th		# of FTE	0.0	0.0				Suppo	orted by S	
Health Education			# of FTE	0.0	0.0						
Additional Services											
Case Management			# of FTE	0.0	0.0					ncl <mark>. in PHI</mark>	
Case Management pro	vides profess	sional staff o	ledicated to insuring a	continuum of	care and fo	llow up for chron	ically ill or p	otentially chro	nically ill pa	tients.	
CHR			# of FTE	0.0	1.0						
	resentatives i	nform com	nunity members about			make referrals	to appropria	te agencies, a	and assist P	HN staff wit	
			health promotion activit					, .			
Diabetes Program			# of FTE	0.0	0.0						
The Diabetes Program	•		patient's education and inically with pre-renal e		-		diabetic pati	ient with preve	entive educa	ation and	
Senior Citizen Cent			# of FTE	0.0	0.0						
Congregate meal, mea	al delivery, coi	mpanionshi <sub>l</sub>	o, advisory, exercise, tr	ansport. (3 p	eople per ce	enter; Suprv., Co	ok, Driver) (	Centers/Staff,			
-110	<b></b> -	70					70				
EMS	73	73	Loc #1 - # of FTE	0.0	0.0		73				
			# of Ambulances Loc #2 - # of FTE	0.0	0.0						
			# of Ambulances	0.0	0.0						
			Loc #3 - # of FTE	0.0	0.0						
			# of Ambulances	0.0	0.0						
• •	•	•	cy medical services with EMT, IEMT and Param	hin the bound		ervice unit. Ambı	ulances are a	available twer	nty-four hou	rs a day	
Alternative Medicine	9		# of FTE	0.0	0.0						
			iropractic services to th			educational servi	ces related i	to various hea	alth issues.	lt also seek	
o alleviate concerns c	ommunity me	mbers may	have regarding unaddi								
Transportation	mont traver		# of FTE	0.7	0.7	nomina unit -	V 011880115-1	a citics !! != !		SAC	
					es within the						
Transportation Departr			ty residents to nealth re nce and the administra							схреносо	
Transportation Departrincurred for automotive  Maternal Child Heal	operation and	nd maintena	nce and the administra # of FTE	tion of garag	e and dispat	ching activities i	n support of	the medical r	nission.		
Transportation Departr ncurred for automotive Maternal Child Heal Maternal and Child Hea	e operation and th alth services o	nd maintena exist to prov	nce and the administra	0.0 childbirth ed	e and dispat  0.0  ucation and	support to Native	n support of	the medical r	nission. ese services	can include	
Transportation Departr incurred for automotive Maternal Child Heal Maternal and Child Hea	e operation and th alth services o	nd maintena exist to prov	nce and the administra # of FTE ride basic prenatal and	0.0 childbirth ed	e and dispat  0.0  ucation and	support to Native	n support of	the medical r	nission. ese services	can include	
Transportation Departrincurred for automotive Maternal Child Heal Maternal and Child Hebbreastfeeding educatio WIC WIC Program provides	e operation and th alth services on/support, ho a nutrition scre	exist to proveme visit eva	nce and the administra # of FTE ride basic prenatal and aluations for pre and po	0.0 childbirth ed est natal care 0.0 mental food a	0.0 ucation and , education c	ching activities in support to Nativo on topics such as on needed Comm	n support of e American I s FAS/FAE, nunity resour	the medical ramothers. The car seat use a	nission. se services and safety, a ant, breastfe	can include and nutrition	
Transportation Departrincurred for automotive Maternal Child Heal Maternal and Child Hebbreastfeeding educatio WIC WIC Program provides	e operation and th alth services on/support, ho a nutrition scre	exist to proveme visit eva	# of FTE ride basic prenatal and put aluations for pre and po # of FTE tition education, suppler	0.0 childbirth ed est natal care 0.0 mental food a	0.0 ucation and , education c	ching activities in support to Nativo on topics such as on needed Comm	n support of e American I s FAS/FAE, nunity resour	the medical ramothers. The car seat use a	nission. se services and safety, a ant, breastfe	can include and nutrition	

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# UIHS Inc., Klamath Health Center



## Delivery Plan - Native American (IHS)

Large Health Station SAC

Establishes Projected workload and key characteristics per product line, while recommending a delivery option.

			Projected Need		Delivery Options						
	PSA Direct	+ ESA Direct	Key Characteristics	# Req'd		PSA		Referrals due to Threshold			
Discipline	Care	Care	(KC)	in 2015	On Site	On Site VP	CHS*	Srv Unit	Region	Remarks	
Domestic Violence			# of FTE	0.0	0.0						
Family Planning/Domestic Violence promotes Native American health through emphasizing benefits of family planning and supporting such emphasis through education, appointment referrals for sterilization procedures, and pre-natal/post-natal home visits to discuss family planning needs; as well as lowering incidents of domestic violence through the provision of shelters/safe houses and/or referrals to other Domestic Violence assistance services. Referrals come through other programs such as WIC, PHN, etc.											
Wellness Center			# of FTE	0.0	0.0						
Wellness Center provides fitness equipment, training, coaching and education for Native Americans of all ages, acting either as an independent service or in support or cooperation with such other programs as Elder Care, Diabetes, CHRs etc.  Outreach Elder Care # of FTE 0.0 0.0											
Elder Care provides an open and supportive environment as well as an outreach program for the community's elders. Lunch distribution, social functions, health education and health benefit counseling is provided by the staff.											
HIV/AIDS			# of FTE	0.0	0.0						
Coordinates all educat with HIV/AIDS.	tional services	for persons	at high-risk for contrac	cting the viru	ıs which caus	ses HIV/AIDS.(	Case manage	ement is also	provided to	those living	
Injury Prevention			# of FTE	0.0	0.0						
Reduce injury morbidit	ty and mortalit	y among Na	ative Americans.			SAC derivat	ive - howeve	r, no space	1		
Tribal Health Admir			# of FTE	0.0	0.0	provided (Sa				- Derivative	
Tribal Health Administration personal control over t	•			health servi	ices for servi	ce unit residents	, while encou	uraging more	self-reliance	and	
Tobacco			# of FTE	0.0	0.0						
Tobacco prevention ar smoke. It also encour						and possession a	as well as red	ducing exposi	ure to secon	d hand	
Bio-Terrorism			# of FTE	0.0	0.0						
The bioterrorism program is responsible for coordination and planning of emergency response activities, including emerging infectious diseases, healthcare security systems and associated policy development for the Service Area.											
Total 2015 Non-De	eviated RRM	Staff FT	Es	11.0	13.7	Required IHS	S Supporta	able Space	Staff	SAC	

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## Resource Allocation - Native American (IHS)

Large Health Station SAC

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

		Direct Health Care					Contract Health Care		
Discipline	Planned Projected Provider Visits	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected Provider Visits	Cost / Unit	Total CH Dollars	
Primary Care	Only					Only			
Family Practice	1,888	Providers	0.6	0.4	67%	0	\$64	\$0	
	Visiting Provid	lers to outlying areas.							
		Provider Offices	1.0	1.0	100%				
1.4 1.54 17.1		Exam Rooms	2.0	3.0	150%		004	Φ0	
Internal Medicine	0 Visiting Provis	Providers lers to outlying areas.	0.0		100%	0	\$64	\$0	
	Visiting Provid	Inpatient Physician	0.0		100%				
		Provider Offices	0.0		100%				
		Exam Rooms	0.0		100%				
Pediatric	0	Providers	0.0		100%	0	\$50	\$0	
	Visiting Provid	lers to outlying areas.							
		Inpatient Physician	0.0		100%				
		Provider Offices	0.0		100%				
01.70		Exam Rooms	0.0		100%		<b>0440</b>	Φ0	
Ob/Gyn	0 Vioiting Provide	Providers	0.0		100%	0	\$110	\$0	
	visiting Provid	lers to outlying areas. Inpatient Physician	0.0		100%				
		Provider Offices	0.0		100%				
		Exam Rooms	0.0		100%				
Urgent Care Clinic	0	Providers	0.0		100%				
· ·	Visiting Provid	lers to outlying areas.							
		Provider Offices	0.0		100%				
		Exam Rooms	0.0		0%				
Primary Care Total	1,889	Providers	0.6	0.4	67%	0		\$0	
	N	Provider Offices	1.0	1.0	100%				
		pport (RN+LPN+CNA)			0%				
	Ambuia	atory Care Nutritionist Exam Rooms	2.0	3.0	100% 150%				
		Dept. Gross Sq. Mtrs		149.3	105%				
		2 op 0.000 0 q			10070				
Emergency Care	0	ER Providers	0.0		100%	242	\$261	\$63,178	
	Nursir	ng Support (RN+LPN)	0.0		100%				
		Patient Spaces	0.0		100%				
	Provider Visits	Dept. Gross Sq. Mtrs	0.0		100%	Provider Visits			
Specialty Care	Only					Only			
Orthopedics	0	Providers	0.0		100%	105	\$134	\$14,014	
		lers to outlying areas.							
		Provider Offices	0.0		100%				
		Exam Rooms	0.0		100%				
Ophthalmology	0	Providers	0.0		100%	84	\$136	\$11,420	
	visiting Provid	lers to outlying areas. Provider Offices	0.0		100%				
		Exam Rooms	0.0		100%				
Dermatology	0	Providers	0.0		100%	83	\$73	\$6,022	
_ 52.0097	_	lers to outlying areas.	0.0		. 00 /0	- 55	Ψ. σ	+ 0, <b></b>	
	. 5	Provider Offices	0.0		100%				
		Exam Rooms	0.0		100%				
General Surgery	0	Providers	0.0		100%	82	\$163	\$13,391	
	Visiting Provid	lers to outlying areas.							
		Provider Offices	0.0		100%				
Otalannali		Exam Rooms	0.0		100%	40	<b>#</b> 00	<b>#4.000</b>	
Otolaryngology	0 Visiting Provide	Providers	0.0		100%	49	\$86	\$4,230	
	visiting Provid	lers to outlying areas. Provider Offices	0.0		100%				
		Exam Rooms	0.0		100%				
			0.0		.00/0				

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#### **UIHS Inc., Klamath Health Center**



## Resource Allocation - Native American (IHS)

Large Health Station SAG

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

	Direct Health Care					Contr	act Healtl	n Care
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Cardiology	0	Providers	0.0		100%	27	\$126	\$3,425
	Visiting Provid	ders to outlying areas.						
		Provider Offices	0.0		100%			
Line is an a	0	Exam Rooms	0.0		100%	20	<b>ሰ</b> ፈርር	<b>#4.000</b>
Urology	0	Providers	0.0		100%	30	\$163	\$4,888
	Visiting Provid	ders to outlying areas.  Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Neurology	0	Providers	0.0		100%	22	\$133	\$2,965
rediology	-	ders to outlying areas.	0.0		10070	22	Ψ100	Ψ2,000
	rioig . rovie	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Other Subspecialties					10070	130	\$96	\$12,430
·						130	φθυ	\$12,430
Nephrology	0	Providers	0.0		100%			
	Visiting Provid	ders to outlying areas.						
		Provider Offices	0.0		100%			
A.U.,		Exam Rooms	0.0		100%			
Allergy	Visiting Dravis	Providers	0.0		100%			
	Visiting Provid	ders to outlying areas.  Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Pulmonology		Providers	0.0		100%			
Fullionology	Visiting Provid	ders to outlying areas.	0.0		100 /6			
	visiting i Tovic	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Gerontology	-	Providers	0.0		100%			
	Visitina Provid	ders to outlying areas.	***		10070			
	3	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Gastroenterology	<del>.</del>	Providers	0.0		100%			
	Visiting Provid	ders to outlying areas.						
		Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Rheumatology		Providers	0.0		100%			
	Visiting Provid	ders to outlying areas.						
		Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Oncology	Visitina Duscia	Providers	0.0		100%			
	Visiting Provid	ders to outlying areas.	0.0		4000/			
		Provider Offices Exam Rooms	0.0 0.0		100%			
Pediatric-Specialist		Providers	0.0		100% 100%			
rediatric-Specialist		ders to outlying areas.	0.0		100%			
	visiting i lovic	Provider Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Traditional Healing	-	Providers	1.0		0%			
Traditional Floating		Provider Offices	1.0		0%			
		Exam Rooms	1.0		0%			
Podiatry Visits	0	Podiatrists	0.0		100%	0	\$0	\$0
ŕ	Visiting Provid	ders to outlying areas.						
	-	Podiatry Offices	0.0		100%			
		Exam Rooms	0.0		100%			
Specialty Care Sub-Total	0	Exam Rooms	1.0	0.0	0%	613		\$72,784
		Provider Offices	1.0	0.0	0%			
	Nursing Sup	port (RN+LPN+CNA)	0.0		100%			
		Dept. Gross Sq. Mtrs	73.0		0%			
Total In-House Providers	1,889	Providers	1.6	0.4	25%			
TOTAL III-LIOUSE LIONIUEIS	1,005	1 TOVIDETS	1.0	0.4	23/0			

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## UIHS Inc., Klamath Health Center



## Resource Allocation - Native American (IHS)

Large Health Station SA

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

	Direct Health Care				Conti	act Healtl	n Care	
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Visiting Professional Clinic	180	Exam	0.0		100%			SAC
Services Include: Opt.		Provider Offices	0.0		100% 100%			
Other Ambulatory Care		Dept. Gross Sq. Mtrs	0.0		100%			
Services								
Dental Service Minutes	53,200	Dentists	1.0		0%	0	\$0	\$0
	Visitia a Dassii	Visiting Specialists	0.0		100%			
	Visiting Provid	ders to outlying areas. Hygienists	0.0		100%			
		Dental Chair	3.0	2.0	67%			
		Specialist Chair	0.0	0.0	100%			
		Dept. Gross Sq. Mtrs		67.4	50%			
Optometry Visits	0	Optometrist	0.1		0%	0	\$204	\$0
	Visiting Provid	ders to outlying areas.						
		Provider Offices	0.0		100%			
		Eye Lanes	0.0		100%			
		Dept. Gross Sq. Mtrs			100%			
Dialysis Patients	0	Dialysis Stations	0.0		100%	0	\$328	\$0
Assaltata assa NCatta	0	Dept. Gross Sq. Mtrs			100%	0	ΦO	¢ο
Audiology Visits	0 Vioiting Brovis	Audiologists ders to outlying areas.	0.0		100%	0	\$0	\$0
	Visiting Provid	Audiologist Offices	0.0		100%			
		Audiologist Offices Audiology Booths	0.0		100%			
		Dept. Gross Sq. Mtrs			100%			
		Dopt. Gross eq. mirs	0.0		10070			
Behavioral Health								
Mental Health		Counselors	0.6	0.2	33%			
Psychiatry		Counselors	0.0		100%			
Social Service		Counselors	0.2		0%			
Alcohol & Substance Abuse		Counselors	1.0	0.0	0%		00	00
Behavioral Health Total	Visitia a Dassis	Total Counselors	1.8	0.2	11%	0	\$0	\$0
	Visiting Provid	ders to outlying areas.  Counselor Offices	2.0	1.0	50%			
		Dept. Gross Sq. Mtrs		17.6	23%	51.3 Base SA	C. Allocation	
		Dept. 01033 0q. Mili	11.0	17.0	23 /0	OT.O Base OA	O Allocation	
Inpatient Care								
Births	0	LDRPs	0.0		100%	11	\$1,983	\$22,206
		Dept. Gross Sq. Mtrs			100%			
Obstetric Patient Days	0	Post Partum beds	0.0		100%	22		
N		Dept. Gross Sq. Mtrs			100%	0.4	<b>A</b> 500	<b>047.500</b>
Neonatology Patient Days	0	# of Bassinets	0.0		100%	31	\$562	\$17,563
Pediatric Patient Days	0	Dept. Gross Sq. Mtrs # of Beds	0.0		100% 100%	16	\$562	\$8,713
i culatilo i ationi Days	U	Dept. Gross Sq. Mtrs			100%	10	ψΟυΖ	ψο,πιο
Adult Medical Acute Care	0	# of Beds	0.0		100%	108	\$1,918	\$207,198
ait modioai / touto Oaio	<b>J</b>	Dept. Gross Sq. Mtrs			100%	100	ψ1,010	Ψ=01,100
Adult Surgical Acute Care	0	# of Beds	0.0		100%	75	\$1,918	\$143,537
3		Dept. Gross Sq. Mtrs			100%		. ,-	
Intensive Care Patient Days	0	# of Beds	0.0		100%	24	\$1,918	\$45,480
		Dept. Gross Sq. Mtrs			100%			
Psychiatric Patient Days	0	# of Beds	0.0		100%	12	\$356	\$4,416
		Dept. Gross Sq. Mtrs			100%			
Medical Detox Patient Days	0	# of Beds	0.0		100%	2	\$356	\$697
0.1.4.4.7		Dept. Gross Sq. Mtrs			100%			
Sub Acute/Transitional Care	0	# of Beds	0.0		100%			
Innationt Caro Total	0	Dept. Gross Sq. Mtrs		0	100%	200		\$440.040
Inpatient Care Total	0	# of patient beds	0	0	100%	289		\$449,810
		Dept. Gross Sq. Mtrs	0	0	100%			

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## Resource Allocation - Native American (IHS)

Large Health Station SAC

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	Direct Health Care				Cont	ract Health	n Care	
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Ancillary Services								
Laboratory Services	1					-		
Clinical Lab	0	Tech staff @ peak	0.0		100%			
Microbiology Lab	0	Tech staff @ peak	0.0		100%			
Blood Bank	0	Tech staff @ peak	0.0		100%			
Anatomical Pathology	0	Tech staff @ peak	0.0		100%			
Lab Total	0	Tech staff @ peak Dept. Gross Sq. Mtrs	0.0	0.0	100% 100%	328	\$192	\$63,167
Pharmacy	0	Pharmacists	0.0		100%	0		\$0
		Dept. Gross Sq. Mtrs	7.7		0%			
Acute Dialysis	0	Rooms	0.0		100%			
Diagnostic Imaging	-	Dept. Gross Sq. Mtrs	0.0		100%			
Radiographic exams	0	Rooms	0.0		100%	0	\$232	\$0
Ultrasound Exams	0	Rooms	0.0		100%	0	\$302	\$0
Mammography Exams	0	Rooms	0.0		100%	85	\$136	\$11,556
Fluoroscopy Exams	0	Rooms	0.0		100%	16	\$56	\$887
CT	0	Rooms	0.0		100%	16	\$736	\$11,658
MRI exams	0	Rooms	0.0		100%	10	\$1,314	\$13,391
Diagnostic Imaging Total	0	Radiologists	0.0		100%	127		\$37,491
		Dept. Gross Sq. Mtrs	0.0		100%			
Nuclear Medicine	0	Rooms	0.0		100%	24	\$723	\$17,572
		Dept. Gross Sq. Mtrs			100%			
Radiation Oncology	0	Rooms	0.0		100%			
		Dept. Gross Sq. Mtrs			100%		• • • • •	
Chemotherapy	0	Patient Spaces	0.0		100%	0	\$1,192	\$0
Rehabilitation Services	-	Dept. Gross Sq. Mtrs	0.0		100%			
PT Visits	0	Therapy FTE	0.0		100%			
OT Visits	0	Therapy FTE	0.0		100%			
Speech Therapy Visits	0	Therapy FTE	0.0		100%			
Rehab Total	0	Therapy FTE	0.0	0.0	100%	0	\$74	\$0
		Dept. Gross Sq. Mtrs	0.0		100%		·	
RT Workload Minutes	0	Therapy FTE	0.0		100%	2,480		\$0
		Dept. Gross Sq. Mtrs	0.0		100%			
Cardiac Catheterization	0	Rooms	0.0		100%	4	\$3,378	\$14,033
	-	Dept. Gross Sq. Mtrs	0.0		100%			
Surgery								-
Outpatient Endoscopy Cases	0	Endoscopy Suites	0.0		100%	10	\$1,495	\$15,391
Outpatient Surgery Cases	0	Outpatient ORs	0.0		100%	38	\$1,657	\$62,240
Inpatient Surgical Cases	0	Inpatient ORs	0.0		100%	9		\$0
		# of Pre-Op Spaces	0.0		100%			
		# of PACU Spaces	0.0		100%			
Surgical Case Total	0	# of Phase II Spaces # of ORs	0.0	0.0	100% 100%	57		\$77,631
Surgical Case Total	U	Dept. Gross Sq. Mtrs		0.0	100%	37		φττ,031
Administrativa Support								
Administrative Support		# of ETC	0.0	2.0	4000/			
Administration		# of FTE	0.0	2.0	100%			
Nursing Administration		Dept. Gross Sq. Mtrs # of FTE	0.0	12.1	100% 100%			
Nursing Administration		Dept. Gross Sq. Mtrs	0.0		100%			
Quality Management		# of FTE	0.0		100%			
Saulty Management		Dept. Gross Sq. Mtrs	0.0		100%			
Information Management		# of FTE	0.7	1.0	143%			
mormation management		Dept. Gross Sq. Mtrs		1.0	100%			
Health Information Mngmt.		# of FTE	0.4	1.0	250%			
		Dept. Gross Sq. Mtrs		28.1	80%			
· · · · · · · · · · · · · · · · · · ·								

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#### **UIHS Inc., Klamath Health Center**



## Resource Allocation - Native American (IHS)

Large Health Station

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

		Direct He	alth Care			Conti	act Healtl	n Care
Discipline	Planned Ke	y Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Business Office	# of		0.0	quootij	100%	. 10,000.00	Onne	Donard
Dusiness Office		t. Gross Sq. Mtrs			100%			
Contract Health	<del> </del>	FTE	0.0		100%			
Contract Health		t. Gross Sq. Mtrs			100%			
Facility Support Services		O.000 Oq	0.0		10070			
		CTC	0.4		00/			
Clinical Engineering		FTE	0.1 0.0		0%			
Facility Management		t. Gross Sq. Mtrs FTE	0.0		100% 0%			
racility Management		r i E t. Gross Sq. Mtrs			100%			
Central Sterile		FTE	0.0		100%			
Certifal Sterile		t. Gross Sq. Mtrs			100%			
Dietary	<del> </del>	FTE	0.0		100%			
Dietary		t. Gross Sq. Mtrs			100%			
Property & Supply		FTE	0.0		0%			
Toperty & Supply		t. Gross Sq. Mtrs			0%			
Housekeeping & Linen		FTE	0.7		0%			
Housekeeping & Linen		t. Gross Sq. Mtrs		3.2	48%			
		i. 01033 5q. Mili3	0.0	5.2	40 /6			
Preventive Care								
Public Health Nursing	# of	FTE	1.3		0%			
Ğ	Visiting Providers t	o outlying areas.						
	Dep	t. Gross Sq. Mtrs	32.4		0%			
Public Health Nutrition	# of	FTE	0.0		100%			
	Visiting Providers t	o outlying areas.						
	Dep	t. Gross Sq. Mtrs	0.0		100%			
Environmental Health	# of	FTE	0.0		100%			
	Dep	t. Gross Sq. Mtrs	0.0		100%			
Health Education	# of	FTE	0.0		100%			
	Dep	t. Gross Sq. Mtrs	0.0	8.1	100%			
Case Management	# of	FTE	0.0		100%			
	Visiting Providers t	o outlying areas.						
	Dep	t. Gross Sq. Mtrs	0.0		100%			
CHR	# of	FTE	1.0	1.0	100%			
	Dep	t. Gross Sq. Mtrs		10.0	74%			
Diabetes Program		FTE	0.0		100%			
		t. Gross Sq. Mtrs			100%			
HIV/AIDS		FTE	0.0		100%			
		t. Gross Sq. Mtrs	0.0		100%			
Tobacco	# of		0.0		100%			
		t. Gross Sq. Mtrs			100%			
WIC		FTE	0.0		100%			
	Dep	t. Gross Sq. Mtrs		8.1	100%			
Wellness Center		FTE	0.0		100%			
	Dep	t. Gross Sq. Mtrs	0.0	23.1	100%			
Additional Services - IHS Su	pported							
Transportation		FTE	0.7		0%	0	\$161	\$0
	Dep	t. Gross Sq. Mtrs	0.0		100%			
Domestic Violence		FTE	0.0		100%			
		t. Gross Sq. Mtrs			100%			
EMS	# of		0.0		100%	73	\$642	\$47,129
	# of	Ambulances	0.0		100%			
	Dep	t. Gross Sq. Mtrs	0.0		100%			
Maternal Child Health		FTE	0.0		100%			
	Dep	t. Gross Sq. Mtrs	0.0		100%			
Tribal Health Administration		FTE	0.0		100%			

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#### **UIHS Inc., Klamath Health Center**



## Resource Allocation - Native American (IHS)

Large Health Station

SAC

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

	Direct Health Care						ract Healt	h Caro
		Direct ne	aitii Care	Exist KC		Conti	act Healt	Care
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	(From Quest.)	% of Need	Planned Projected	Cost / Unit	Total CH Dollars
Alternative Medicine		# of FTE	0.0		100%			
Dia Tananiana		Dept. Gross Sq. Mtrs # of FTE	0.0		100% 100%			
Bio-Terrorism		Dept. Gross Sq. Mtrs			100%			
Injury Prevention		# of FTE	0.0		100%			
, ,		Bldg. Gross Sq. Mtrs.	0.0		100%			
Security		# of FTE	0.0		100%			
		Dept. Gross Sq. Mtrs	0.0		100%			
Total 2015 Non-Deviated RRM vs Existing Recurring IHS Positions			11.0	2.0	18%			SAC
IHS Supportable Space Staff Required vs. Existing			13.7	3.0	22%			
IHS Supportable Space - Building Gross Square Meters			932	392	42%			
Substance Abuse Non- Acute Care								
Adult Residential Treatment	0	# of Beds Dept. Gross Sq. Mtrs	0.0 0.0		100% 100%			
Adolescent Residential	0	# of Beds	0.0		100%			
Treatment		Dept. Gross Sq. Mtrs			100%			
Substance Abuse Transitional	0	# of Beds	0.0		100%			
Care		Dept. Gross Sq. Mtrs	0.0		100%			
Total SANAC - Building Gro	ss Square M	eters	0	0	100%			
Additional Services - Non-IHS	Supported							
Elder Care								
Nursing Home	0	# of patient beds	0.0		100%			
		Bldg. Gross Sq. Mtrs.			100%			
Assisted Living	0	# of patient beds	0.0		100%			
Hanning	^	Bldg. Gross Sq. Mtrs.			100%			
Hospice	0	# of patient beds Bldg. Gross Sq. Mtrs.	0.0		100% 100%			
Senior Citizen Center	-	# of FTE	0.0		100%			
Gerilor Gitizeri Geriler		Bldg. Gross Sq. Mtrs.			100%			
Outreach Elder Care	-	# of FTE	0.0		100%			
		Bldg. Gross Sq. Mtrs.			100%			
Home Health Care	0	# of Home Health Care FTE	0.0		100%	0	\$0	\$0
		Bldg. Gross Sq. Mtrs.			100%			
Elder Care Total	0	# of patient beds	0	0	100%			
		Bldg. Gross Sq. Mtrs.	. 0	0	100%			
Total Elder Care - Building Gross Square Meters				0	100%			

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#### **UIHS Inc., Klamath Health Center**



## Resource Allocation - Native American (IHS)

Large Health Station

Compares # of Key Characteristics (KC) required in 2015 to the Existing Key Characteristics. Existing data was collected from the site visit questionnaires. Also projects necessary Contract Health \$ by Service Line as determined in the Delivery Plan.

	Direct Health Care						
Discipline	Planned Projected	Key Characteristics (KC)	# Req'd in 2015	Exist KC (From Quest.)	% of Need		
Miscellaneous Services							
		# of FTE	0.0		100%		
		Bldg. Gross Sq. Mtrs.	0.0		100%		
		# of FTE	0.0		100%		
		Dept. Gross Sq. Mtrs	0.0		100%		
		# of FTE	0.0		100%		
		Dept. Gross Sq. Mtrs	0.0		100%		
		# of FTE	0.0		100%		
		Bldg. Gross Sq. Mtrs.	0.0		100%		
Miscellaneous Services Buil	Miscellaneous Services Building Gross Square Mtrs						
Grand Total - Total Building	932	392	42%				

Contract Health Care									
Planned	Cost /	Total CH							
Projected	Unit	Dollars							

Contract Health Dollars Sub-Total	\$842,796
Other Expenditures - Contract Health	\$328,690
nflation Adjusted CHS \$ - Total	\$1,569,792

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